	CHEDULE A (FEC Form 3) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 44 / 300 (check only one) X
Ar	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Rob Andrews U.S. House Committee	statements may not be sold or used by any person ename and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Les Hirsch Mailing Address 4033 Hermitage Dr. City Voorhees FEC ID number of contributing federal political committee. Name of Employer Touro Infirmary Receipt For: 2010 Primary X General	State Zip Code NJ 08043 C Occupation Health Care Admin. Election Cycle-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y O 9
 3.	Other (specify) Full Name (Last, First, Middle Initial) Harold Hodes Mailing Address 414 Riverview Plaza City Trenton FEC ID number of contributing federal political committee. Name of Employer Information Requested Receipt For: 2010	State Zip Code NJ 08611 C Occupation Information Requested Election Cycle-to-Date	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
 ;.	Primary X General Other (specify) ▼ Full Name (Last, First, Middle Initial) Colleen Hogan Mailing Address 1204 South Park Ave. City Haddon Heights FEC ID number of contributing federal political committee. Name of Employer Information Requested Receipt For: 2010 Primary X General	State Zip Code NJ 08035 C Occupation Information Requested Election Cycle-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y O 9 3 0 2 0 1 0 Transaction ID: C2771758 Amount of Each Receipt this Period 500.00
s	UBTOTAL of Receipts This Page (optional)	750.00	1750.00